

YOUTH SERVICES POLICY

Title: Use of Interventions - Secure Care	Type: C. Field Operations Sub Type: 2. Security Number: C.2.6
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References: Bailey v. Turner, 736 F.2d 963 (U.S. 4th Cir. 1984); Soto v. Dickey, 36 Cr. L 2068 (U.S. 7th Cir. 1984); Beard v. Stephens, 372 F. 2d 685 (U.S. 5th Cir. 1967); In re: Riddle, 57 Cal. 2d 843, 372 P. 2d 304 (1962); ACA Standards 2-CO-3A-01 (Administration of Correctional Agencies); 4-JCF-2A-10, 4-JCF-2A-15, 4-JCF-2A-16, 4-JCF-2A-17, 4-JCF-2A-19, and 4-JCF-2A-29 (Performance-Based Standards for Juvenile Correctional Facilities); YS Policy Nos. A.1.4 "Investigative Services", A.1.14 "Unusual Occurrence Reports", A.2.1 "Employee Manual", A.2.2 "Pay Administration and Management", A.2.14 "Secure Care Facility Staffing", A.2.24 "Staff Development and Training Plan", A.7.1 "Safety Plan", B.2.8 "Transitional Treatment Unit (TTU)", B.2.21 "Behavioral Intervention (BI) and Extended BI", B.6.2 "Communicable and Contagious Diseases and Infection Control Program", B.6.4 "Accident and Injury (A&I) Evaluations", C.1.6 "Establishment and Review of Secure Care Facility Standard Operating Procedures (SOPs)", C.2.2 "Facility Riot, Significant Disturbance, and Hostage Situation", C.2.12 "Emergency Escorting", C.5.1 "Required Database Entry and Reporting Requirements", and C.5.2 "Regional Office Duty Officers, and Facility Administrative Duty Officers (ADOs) Reporting of Serious Incidents"	
STATUS: Approved	
Approved By: Otha "Curtis" Nelson, Jr., Deputy Secretary	Date of Approval: 10/27/2023

I. AUTHORITY:

Deputy Secretary of Youth Services (YS) as contained in La. R.S. 36:405. Deviation from this policy must be approved by the Deputy Secretary.

II. PURPOSE:

To establish Threat Pattern Recognition in all YS' secure care facilities as the approved intervention curriculum for intervening in crisis situations, by providing rules and procedures regarding physical interventions and the authorized uses of mechanical restraints. This policy is designed to minimize the possibility of injury to youth and staff, and maximize the effectiveness of the use of physical interventions and restraints.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Youth Facilities Director - Statewide, Chief of Operations, Executive Management Advisor, General Counsel, Investigative Services staff, Contracted Health Care Provider (CHP), designated Central Office staff as determined by their job duties, Facility Directors, and all secure care staff.

Facility Directors are responsible for ensuring that all necessary written procedures as outlined in this policy, regarding the Use of Interventions/TPR and the circumstances under which it is to be utilized, are in place. (Refer to YS Policy No. C.1.6)

IV. DEFINITIONS:

Active Aggression – A threat or overt act of an assault (through physical or verbal means), coupled with the present ability to carry out the threat or assault, which reasonably indicates that an assault or injury to any person is likely to occur.

Behavior and Accommodations Binder (BAB) – A binder containing the history of youth requiring physical intervention, as well as the most current Unified Behavior Plan (UBP) for Youth with Special Needs. The BAB shall contain these two (2) documents for youth residing in a particular housing area, and shall be maintained in a secured area readily accessible to staff at all times. Staff shall be advised of the location, content and purpose of the binder as it relates to this policy, and shall review the BAB at the beginning of every tour of duty, documenting their review in the unit's logbook.

Behavior Intervention (BI) - Temporary assignment of a youth to a self-contained unit when the youth's continued presence in the general population poses a threat to staff or other youth, pending investigation of a potential threat, or when his activities are destabilizing or highly disruptive to programming. Behavioral Intervention provides a structured therapeutic environment that targets chronic, aggressive, intimidating, and sexual acting out behavior.

Behavioral Intervention (BI) Documentation Packet – A packet set up on youth, who are temporarily assigned to BI, containing all correspondence, reports and forms.

Chemical Agent - Any product which is dispensed by means of an aerosol spray to control an individual's combative and/or resistive behavior.

Debriefing (Staff) - A structured counseling session held immediately following the use of physical intervention, but no later than the involved staff's tour of duty, with the Facility Director/Deputy Director/Assistant Director to examine the events that occurred and what actions could be improved upon in the future.

Debriefing (Youth) - A counseling session or circle-up held immediately following the use of physical intervention, with a supervisor not involved in the incident and counseling staff if available, to help the youth develop an awareness of his misbehavior and to find more acceptable ways of coping.

Developmentally Disabled/Intellectually Disabled (DD/ID) – Refers to significantly impaired intellectual and adaptive functioning with an Intelligence Quotient (IQ) of 68 or below with concurrent deficits or impairments in present adaptive functioning in at least two of the following areas: communication; self-care; home living; social/interpersonal skills; use of community resources; self-direction; functional academic skills; work; leisure; health and safety; with onset before age 18.

Flex Cuffs - A flexible plastic restraining device designed specifically for restraining individuals, used only in extraordinary situations, and only under the guidelines established in this policy.

Force - A physical or mechanical intervention that causes someone to act in a manner contrary to his intent or causes him to change his behavior to a desired action or to more desirable conduct.

Investigative Services (IS) - The internal investigation section of YS/OJJ.

Juvenile Justice Specialist (JJS) - Provides security of youth and assists in application of clinical treatment in accomplishing the overall goal of evaluation and/or treatment of individuals judicially remanded to a YS secure care facility.

Mechanical Restraints - Approved handcuffs, handcuff belts, leg irons, and their keys; that shall only be applied by trained staff.

One-on-One Supervision - Constant observation of a youth by assigned staff, who shall remain within six (6) feet of the youth at all times without interruption, and who shall not be permitted to engage in other activities during this assignment.

Operations Shift Supervisor (OSS) – An employee who is responsible for a range of duties that support management in maintaining a safe, secure facility. Shift Supervisors oversee administrative and operational security activities during specific shifts; manage staff during each assigned shift; ensure adequate security coverage; lead count procedures; oversee the custody, supervision and control of secure care youth; manage frontline security staff; assist in controlling youth movement; assist in directing the use and issuance of keys, locks, and security equipment.

Physical Intervention - A use of force which involves the application of approved techniques or restraints by a staff member to physically restrain a youth whose behavior is out of control, presenting an unsafe situation.

Precaution Body Fluid (PBF) - Known to transmit HIV and hepatitis viruses.

Seriously Mentally Ill (SMI) – Disorders of mood and cognition (with the exception of youth diagnosed with individual deficit disorder/ID) that significantly interfere with functioning in at least one essential sphere of the youth's life (e.g. psychotic disorders, mood disorders, the aggressively mentally ill, and youth who exhibit self-mutilating or suicidal behavior). Youth with these disorders may be referred to as "SMI" youth.

Staff Development Training Specialist- A full time secure care trainer position, at the unit level that has completed a specialized 40-hour training-for-trainers curriculum through the agency or other qualified source, [i.e., American Correctional Association, National Institute of Corrections, Federal Bureau of Investigation Instructor Development Course (FBI-IDC), etc.], responsible for the development, documentation and delivery of the agency's approved training.

Tap Out - A technique used to remove a staff member involved in a situation whose continued involvement has the potential for escalating or aggravating an incident by indicating that the staff member has a "phone call" or is needed in another room.

Threat Pattern Recognition (TPR) – A system that examines the patterns associated with an assault or a lethal assault and engineers a tactical solution based on science and motor performance. The TPR system embraces the realities of time, and engineers solutions that change tactical timelines. The system is an outcome of Pressure Point Control Tactics' (PPCT's), tactical, legal, medical, and Survival Reactions Time Research.

Tour of Duty - The time an employee spends on duty at work, from the time he reports for duty until the end of his shift or until he is authorized to leave the facility.

Transitional Treatment Unit (TTU) – A maximum custody unit for youth described as violent and aggressive with a documented history of engaging in behavior which creates or incites aggressive responses from others and creates an unsafe therapeutic environment for staff and youth.

Unified Behavior Plan (UBP) - A document developed by the youth's Case Manager and maintained on youth designated by the contracted health care provider as having an individual deficit disorder. This plan shall include any physical limitations and/or precautions that staff must be aware of in the event a physical intervention is necessary.

Unusual Occurrence Report (UOR) - A document that must be completed by staff to report incidents or observations of events that may have an impact on any aspect of the agency. UOR forms shall be made available to all employees, working all areas at all times. Employees must complete and submit a UOR prior to the end of their tour of duty on the day the incident was observed or comes to the employee's attention in any way. If a UOR form is not available, the employee must use any paper available to report the pertinent information. UORs may also be submitted by email. (Refer to YS Policy No. A.1.14)

V. POLICY:

It is the Deputy Secretary's policy that all reasonable steps shall be taken to minimize situations requiring the use of a physical intervention by staff against youth, and to minimize the amount of physical intervention required in those situations. It is recognized, however, that physical intervention may be necessary to accomplish the legitimate goals of YS, including public safety, the safety of staff and youth, and the maintenance of stability and safety.

Crisis situations shall be managed by the principle of the **least restrictive alternative**. Use of force situations may be managed by the **One Plus Control Theory**. It is the policy of the Deputy Secretary that physical intervention shall be used as a last resort when all other means of intervention have been unsuccessful or when time and circumstance do not permit alternative options.

In crisis situations, mechanical restraints may only be used as described in this policy and with the expressed approval of the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide, when all available less forceful measures fail to accomplish control.

The physical intervention used shall be in proportion to the threat and shall cease when the resistance ceases. **Only approved techniques may be used.**

Employees are to act in accordance with TPR/Use of Intervention methods approved by YS when confronted with situations requiring the use of physical intervention. All uses of physical intervention shall be managed and monitored by appropriate supervisory personnel whenever possible, time and circumstance permitting, and as specifically described herein.

VI. ESSENTIAL FUNCTIONS:

Designated Central Office staff, as determined by their duties, and OJJ secure care facility staff must fully participate in both the theory and physical portions of the TPR/Use of Interventions training, and must pass the theory portion.

- A. Existing JJS staff: Shall fully participate in TPR/Use of Interventions training, unless medical certification dictates otherwise, passing both the theory and physical portions. Medical certification must be provided indicating that the employee cannot pass the physical portion.
1. *Temporary inability*: For those persons whose inability to pass the physical portion is temporary, the medical certification document shall stipulate that the inability to pass the physical portion is temporary. If temporary, the staff member shall be required to pass the physical portion when that inability is no longer present. Quarterly medical updates are required for those with temporary disabilities reflected in the medical certification. The original medical certification shall be submitted to the Facility Director, with a copy to the supervisor and the facility Staff Development Training Specialist for continuous monitoring of the employee's training status.
 2. *Permanent inability*: If the inability is due to a permanent condition, an update is required at the annual performance evaluation review. Failure to submit the required medical certification shall subject the employee to disciplinary action for failure to follow a direct order (refer to YS Policy No. A.2.1).

Facility Directors are required to establish and implement procedures for obtaining quarterly / annual medical certification for staff that have a medical reason as to why they cannot participate in any part of the TPR/Use of Interventions training. Whether this inability is permanent or temporary, medical certification must be presented to the Facility Director and forwarded to Office of Juvenile Justice (OJJ) Human Resources (HR) and the facility HR Liaison.

- B. New hires: All JJS staff hired on August 20, 2009 or later are required to pass both the theory and physical portions of TPR/Use of Interventions training in order to retain their position. If a new hire fails either portion of the test, the new hire shall be allowed one opportunity to re-take that portion. Retesting must occur within ten (10) working days. Failure to pass shall result in separation from employment.

It is the responsibility of the Facility Director to ensure that newly hired JJS staff not participate in on-the-job training (OJT) or any other activity in which they will be in close proximity of youth until they have successfully completed the theory and physical portion of the TPR/Use of Interventions Training.

VII. GENERAL:

- A. Physical Intervention shall not be used when a youth is under control and shall not normally be used if the youth is in a self-contained unit, unless all other means of control have failed.
- B. Physical intervention shall not be used for the harassment or punishment of youth.
- C. Physical intervention shall only be used to the degree and duration necessary to gain compliance. In accordance with the use of force principals taught in the TPR Resistance/Control Continuum, the employee may exercise one level of control higher than the level of resistance encountered in times when the lesser level of force is effective.
- D. Physical intervention using any technique other than that which is taught in the YS approved curriculum is strictly prohibited.
- E. The Unit Management Team shall review the Behavior Accommodations Binder (BAB) on a daily basis. JJS staff shall document their review in the unit logbook; social services staff shall document their review in the Daily Observation Log.
- F. When time and circumstances permit, physical intervention shall not be used against identified seriously mentally-ill (SMI) or youth diagnosed with ID before appropriate medical, mental health or counseling personnel can be called to the scene to assist in managing the youth.
- G. Any staff member present during an incident is required to implement the "tap out" technique when a particular staff member's involvement has the potential for escalating or aggravating an incident. Use of the "tap out" technique must be reported on the Unusual Occurrence Report (UOR). A staff member who is "tapped out" must immediately leave the room or general area of the incident. This does not prevent the tapped out staff member from returning to provide staff assistance if the need arises.
- H. The following debriefings shall take place as soon as possible after the incident, but no later than the end of the involved staff's tour of duty. The supervisor shall document these findings on the "Use of Physical Intervention/Mechanical Restraint/Flex Cuff Report" form [See attachment C.2.6 (a)].

1. Youth debriefing:

A counseling session or circle-up held immediately following the use of physical intervention with a supervisor not involved in the incident and counseling staff if, available, to help the youth develop an awareness

of his misbehavior and to find more acceptable ways of coping. (If a youth makes an allegation of abuse, staff shall not discuss the allegation with other persons or youth except in the course of reporting the allegation. Confronting a youth about the allegations in the presence of other youth or “circle ups” is prohibited.)

2. Staff debriefing:

A structured counseling session held immediately following the use of physical intervention, but no later than the involved staff's tour of duty, with the Facility Director/Deputy Director/Assistant Director to examine the events that occurred and what actions could be improved upon in the future.

- I. Any staff person who witnesses a use of physical intervention or to whom an allegation of excessive or inappropriate use of physical intervention is made shall immediately report the incident to his or her supervisor. A UOR shall be submitted to the supervisor fully documenting the circumstances of the incident or allegation prior to the end of the reporting employee's tour of duty. Failure to file this report prior to the end of the staff member's tour of duty or to undertake any action to misrepresent, misidentify, distort, ignore, or falsely state or fail to report all of the circumstances shall result in disciplinary action. Any willful misrepresentation that meets the standard established for criminal prosecution shall be reviewed by the Deputy Secretary and possibly submitted to the appropriate law enforcement authority.
- J. Immediately after a situation has been brought under control through the use of physical intervention, the youth involved shall be examined by qualified medical personnel. Staff may also be referred to facility medical personnel.
- K. Medical staff shall document in the youth's medical record any injuries reported or observed. Medical staff are also required to call the IS Hotline to report any injuries that appear to have resulted from excessive or inappropriate use of physical intervention.
- L. All “Accident & Incident (A&I) Reports” and photographs shall be forwarded to IS for review upon completion. (Refer to YS Policy Nos. A.1.4 and B.6.4)
- M. Precautions for potential contact with PBF or Type I non-PBF shall follow the established guidelines in YS Policy No. B.6.2.

VIII. AUTHORIZED USE OF PHYSICAL INTERVENTION:

- A. The use of physical intervention is authorized in order to:
1. Prevent an escape;
 2. Prevent an act that could result in death or bodily harm to the youth or to another person;
 3. Defend one's self or others against a physical assault;
 4. Separate participants in an altercation;
 5. Prevent damage to property; and/or security systems or to recover a weapon;
 6. Control a high profile incident, such as a major group/unit disturbance which threatens the safety/security of the facility; or
 7. Enforce direct orders or instructions when all the steps of the continuum have been exhausted.

IX. PHYSICAL INTERVENTION CONTINUUM:

- A. Physical intervention shall be used only as a last resort, time and circumstance permitting. Employees shall take all reasonable steps as outlined in C.1-9 below to minimize situations requiring physical interventions. If physical intervention is required, it shall only be used at the level necessary to achieve the lawful purpose.

Staff members are responsible for a working knowledge of the BAB for the youth under their supervision. Staff shall continuously consult the BAB to keep themselves aware of the youth's special handling needs and/or special coding. This will allow staff to determine the appropriate course of action to handle the youth.

- B. When there is no immediate threat to personal safety, factors to consider when determining the need for physical intervention include but are not limited to:
1. The lack of appropriate response to repeated direct orders, de-escalation techniques and other efforts to temper the situation;
 2. The severity of the situation and/or behavior;
 3. The serious disruption to the unit or program activity and supervision;

4. The prospect that other youth may become involved in disruptive behavior;
 5. The prospect of potential for damage to security or safety systems; or
 6. The prospect of potential escape.
- C. The steps of the physical intervention continuum are as follows:
1. Request for compliance by giving verbal instructions in a fair and respectful manner.
 2. Discussion/counseling with the youth involved in the negative behavior in an attempt to de-escalate the situation.
 3. Continued dialogue in a firm non-threatening manner clearly instructing the youth engaged in noncompliant behavior to cease the activity and comply with the request of staff.
 4. Calling for additional staff (if available) in the immediate area to provide staff presence where the incident is occurring. Staff shall approach in a non-threatening manner and at the same time assess the situation. If no additional staff is available, the control center/supervisor should be contacted immediately.
 5. Once additional staff is present, they may assist in isolating the situation by either removing the youth or the remaining youth from the immediate area and providing back-up for the staff engaging the youth.
 6. "Tap out" of the staff member involved in an escalating situation whose continued involvement has the potential for escalating or aggravating an incident. This is done by indicating that the staff member has a "phone call" or is "needed in another room." The replacement staff shall then attempt to counsel the youth and continue with the de-escalation process. This does not prevent the tapped out staff member from returning to provide staff assistance if the need arises.
 7. Removing the youth if the youth does not comply with verbal instructions and additional staff has been called to the area. Removals occur in two forms:
 - a. Voluntary seclusion of the youth in his room if assigned to a specialized unit; or
 - b. Removing the youth without the use of physical intervention to an empty dayroom, empty hallway or other area within camera view that can be secured if permissible.

8. Special consideration youth:
 - a. Staff shall take note of any medical problems the youth has that makes the application of physical intervention inappropriate.
 - b. Staff shall take note of any SMI/ID problems the youth has that make the application of physical intervention inappropriate. Mental health assistance shall be requested to counsel and assist the youth in regaining self-control, and encourage the youth to comply with the requests of staff.
9. If all previous efforts listed above at gaining compliance have not been successful, the following shall occur:
 - a. Staff involved shall contact the control center or Operations Shift Supervisor (OSS) and advise them of the escalating situation.
 - b. The control center operator shall dispatch the OSS and additional staff to the area to assist with the situation.
 - c. The OSS shall assume control of the situation upon arrival and assign arriving staff to strategic positions within the area to present a non-threatening yet numerically sufficient staffing presence to assist in convincing the youth that it is in their best interest to comply with staff's verbal directions.

In the event reduced staffing patterns result in a critical staffing shortage, the situation shall be addressed immediately following the guidelines established in YS Policy No. A.2.14. At no time shall a Facility Director determine critical staffing reinforcement patterns without consulting the Youth Facilities Director - Statewide.

To avoid escalating the incident, the youth shall not be crowded. Staff shall remain at a discrete distance from the youth while counseling is taking place, and shall take direction from the OSS until the situation is resolved. The OSS shall complete the following:

- 1) Consult with the staff on the scene regarding the situation;
- 2) Devise a plan for handling the situation and discuss it with staff present as appropriate;
- 3) Position staff to affect an appropriate physical intervention, if necessary;

- 4) Counsel the youth in an attempt to gain compliance;
 - 5) Instruct the youth to comply;
 - 6) Explain the consequences of noncompliance to the youth;
 - 7) Make one last attempt to gain compliance;
 - 8) If the youth fails to comply, the OSS shall instruct staff to use physical intervention and assist the youth out of the area;
 - 9) If the youth resists attempts to physically assist him from the area, the OSS shall direct increasing levels of physical intervention; however, prior to an initial application of mechanical restraints, the expressed approval of the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide/Assistant Secretary must be granted;
 - 10) The OSS shall ensure that all post-intervention protocols are followed, including having the youth examined by medical and ensuring that staff and youth debriefings occur; and
 - 11) Ensure all staff assigned to the area, called to the area, or present during the incident complete a UOR prior to the end of their tour of duty. Staff who are physically involved in an incident of Active Aggression or higher will be required to write an initial UOR prior to the completion of their tour of duty. The initial UOR will give a brief explanation of what happened and should be concluded with "a supplemental UOR is pending". A supplemental UOR (with a full/comprehensive/detailed report of the incident) should be completed within 24 hours of the initial UOR.
- d. The use of physical/mechanical intervention shall not be employed prior to the expressed approval of the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide/Assistant Secretary, and without a supervisor's arrival on the scene, unless the situation becomes an uncontrolled escalated situation as described in Section X below.

X. EXCEPTIONS TO THE CONTINUUM:

A. Uncontrolled escalated situations are those which may require the immediate employment of physical intervention in order to attempt to physically stop a youth from causing serious injury to themselves or others, and in which the youth physically resists the staff's attempt to stop their uncontrolled behavior, are defined as follows:

1. To prevent an escape;
2. To prevent an act that could result in death or bodily harm to the youth or another person;
3. To defend one's self or others against a physical assault;
4. To separate participants in an altercation;
5. To prevent substantial damage to property and/or security systems or to recover a weapon;
6. A high profile incident, such as a major group/unit disturbance which threatens the safety/security of the facility.

Use of physical intervention in circumstances listed in 1 through 6 above shall not require the approval of the supervisor or above prior to use. The intervention utilized and the reason for the intervention must be clearly articulated on the UOR, which must be submitted prior to the end of all involved staff's tour of duty.

XI. AUTHORIZED USES OF MECHANICAL RESTRAINTS:

Mechanical restraints shall not be utilized for the purpose of punishment. When the need for mechanical restraints arises, restraints shall not be applied without the expressed approval of the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide/Assistant Secretary. The use shall be time limited, with restraints used no longer than it takes for a youth to become calm. As soon as the youth is calm and there is no further threat of danger to self, others or government property, the restraints shall be removed immediately.

Throughout the use of mechanical restraints, the OSS on duty shall be present to actively engage, coach and model appropriate and expected de-escalation techniques to JJS staff. The OSS shall remain present with the restrained youth and staff until such time as the mechanical restraints have been removed. If approval is granted by the Youth Facilities Director - Statewide/Assistant Secretary, the Facility Director shall be immediately notified upon authorization and subsequently upon removal.

If there is cause for the prolonged use of the restraints for a duration of 15 minutes or longer due to grave concern for the safety of the restrained youth or others, the Facility Director shall consult with the Youth Facilities Director - Statewide/Assistant Secretary for the continued use of restraints. Subsequently, the Facility Director shall also notify the Youth Facilities Director - Statewide/Assistant Secretary when restraints are removed.

- A. Mechanical restraints that are authorized for use as noted in attachment C.2.6 (b) are:
 - 1) Handcuffs;
 - 2) Handcuff belts; and
 - 3) Leg irons.
- B. When a handcuff belt is not used, handcuffs shall be applied behind the back to minimize the risk of injury to the youth and staff.
- C. Mechanical restraints may be used under the conditions set forth below. Youth in restraints must be under continuous close visual supervision.
 - 1. For transportation of youth outside the facility, staff shall utilize handcuffs, leg irons and/or handcuff belts unless the Facility Director orders that they be transported without restraints (i.e., for medical reasons); or
 - 2. For movement of youth within the facility, no mechanical restraints shall be used except under the following conditions:
 - a. Handcuffs and/or handcuff belt may be used if the facility has documented that the youth poses a current escape risk or has engaged in a recent pattern of assaultive behavior toward staff or other youth, as determined and authorized by the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide/Assistant Secretary.
 - b. Leg irons may only be used within the facility if the conditions of Section XI.C.2.d below are met.
 - c. Handcuffs and/or a handcuff belt may be used to transport a youth from regular housing to a self-contained unit after an altercation or other serious incident.
 - d. Handcuffs, a handcuff belt and/or leg irons may be used by trained staff for control of a youth who after less restrictive measures, have not been successful and continues to engage in aggressive or assaultive behavior or presents a danger to himself, another youth, staff, or the security of the facility.

Prior approval must be granted by the Facility Director/Deputy Director/Assistant Director or, in their absence, the Youth Facilities Director - Statewide/Assistant Secretary. ***Continuous one-on-one visual and physical supervision is required in these instances.*** The staff person assigned to provide continuous one-on-one supervision shall ensure that the physical needs of the youth are met promptly.

- D. A medical examination after the routine use of mechanical restraints (i.e. court, field trips, medical trips, etc.) is not required. However, immediate medical treatment shall be provided if there is a visual indication of an injury or if the youth identifies a specific medical complaint.

A medical examination is required for all other uses of mechanical restraints.

- E. Mechanical restraints shall be applied in a manner that is consistent with the YS approved training curriculum, and shall not be applied in a manner:
1. That causes undue physical discomfort, inflicts unnecessary pain, or restricts the blood circulation or breathing of the youth; or
 2. That is continued beyond the period of time needed to enable the youth to gain control of his behavior, or following the termination of transportation or movement.
- F. Reporting and documentation requirements are as described in Section XVIII of this policy.

XII. LIMITED USE OF FLEX CUFFS IN EXTRAORDINARY SITUATIONS:

- A. Flex cuffs shall only be used under the following guidelines established in this policy, and following the guidelines set forth in Section XI above:
1. When the supply of approved mechanical restraints in the facility is exhausted; or
 2. When conventional mechanical restraints do not fit the youth due to the youth's size; or
 3. During an emergency mass transportation of youth from the facility to a safe location (i.e., hurricane, disaster, etc.). (Refer to YS Policy No. C.2.12)
- B. Reporting and documentation requirements for the use of flex cuffs are as described in Section XVIII of this policy.

XIII. PERSONNEL AUTHORIZED TO CARRY HAND-CUFFS AND MECHANICAL RESTRAINT KEYS:

- A. Handcuffs may only be carried by staff approved by the Facility Director and must be worn on the belt in a standard handcuff case.
- B. Only OJJ issued/purchased mechanical restraints shall be used. The carrying or use of personal mechanical restraints shall result in disciplinary action.
- C. Staff shall only possess restraint keys that have been issued with the restraint. Possession of any other restraint keys at any time is strictly prohibited.

XIV. INVENTORY, STORAGE, MAINTENANCE, AND SANITATION OF MECHANICAL RESTRAINTS:

- A. All mechanical restraint equipment shall be stored in a secure but readily accessible storage site outside of youth housing and activity areas. A written record shall be maintained at each facility of all routine and emergency distribution of mechanical restraint equipment.
- B. Each facility's procedures on inventory, storage, maintenance and sanitation of mechanical restraints shall include the specific guidelines outlined below:
 - 1. Each mechanical restraint device shall include a unique identifying number.
 - 2. An inventory logbook shall be maintained at the restraint storage site indicating each mechanical restraint device's unique identifying number.
 - 3. Staff responsible for mechanical restraints shall make a log entry at the beginning of each shift indicating the number of restraints present and their condition (are they clean and in good working order).
 - 4. When a mechanical restraint device is removed/checked out from the storage site, the staff member checking out the device shall record the following information in a separate logbook designated for mechanical restraint device usage:
 - a. Date and time of removal;
 - b. Name of person authorizing the removal;
 - c. Name of person removing the device;
 - d. Identifying number;
 - e. Reason for the removal;
 - f. Date and time the device was returned; and

- g. Indication as to whether or not the mechanical restraint device was used while checked out.
- 5. Mechanical restraint equipment shall be sanitized on a routine basis and following each use with a disinfectant. Disinfectants maintained for this purpose shall be properly stored in the area and inventoried pursuant to YS Policy No. A.7.1.

XV. INVENTORY AND STORAGE OF FLEX CUFFS:

- A. Flex cuffs shall be stored in a secure but readily accessible storage site outside of youth housing and activity areas. A written record shall be maintained at each facility of all routine and emergency distribution of flex cuffs.
- B. Each facility's procedures on inventory and storage of flex-cuffs shall include the specific guidelines outlined below:
 - 1. An inventory of flex cuffs consistent with the youth population shall be maintained at each secure care center for youth and shall be available and accessible in extraordinary situations as outlined in XII.A above.
 - 2. When a flex cuff device is removed/checked out from the storage site, the staff member checking out the device shall record the following information in a separate logbook designated for flex cuff restraint device usage:
 - a. The number of flex cuffs on hand prior to and following each usage;
 - b. Date and time of removal;
 - c. Name of person authorizing the removal;
 - d. Name of person removing the device;
 - e. Number of flex cuffs removed;
 - f. Reason for the removal;
 - g. Number of flex cuffs returned; and
 - h. Indication as to whether or not the device was used or returned unused.
- C. Flex cuff cutting tools designed to release youth from flex cuffs shall be on hand at all times and stored at the storage site. The facility procedure shall ensure that flex cuff cutting tools are made available to staff when flex cuffs are issued.

XVI. USE OF PHYSICAL INTERVENTION IN A FACILITY RIOT, SIGNIFICANT DISTURBANCE, OR HOSTAGE SITUATIONS:

The use of deadly force/immediate incapacitation is not in the YS training curriculum. In the event of a facility riot, significant disturbance, hostage situation, serious or other incident that presents clear and imminent danger to staff, youth or visitors, outside law enforcement agencies such as local police or state authorities may be summoned to intervene at the discretion of the Facility Director. (Refer to YS Policy No. C.2.2)

XVII. AUTHORIZED USE OF CHEMICAL AGENTS:

- A. For the secure care facilities and the Transitional Treatment Unit (TTU), the Assistant Secretary may authorize the use of chemical agents when the situation is such that the youth:
 - 1. Is armed/and/or barricaded; or,
 - 2. Cannot be approached without danger of bodily harm to self or others; and
 - 3. It is determined that a delay in bringing the situation under control would constitute a serious hazard to the youth or others, or would result in a major disturbance or serious property damage.
- B. Chemical agents may not be used upon youth for purely punitive or malicious purposes – use must be justified upon circumstances that meet the standards in Sections XVII.A.1 or XVII.A.2 above.
- C. Chemical agents shall be stored in accordance with the guidelines of Section XVII.H below. Chemical agents shall never be stored on an employee's person.
- D. Qualified health personnel shall be consulted prior to staff using chemical agents unless the circumstances require an immediate response. If possible, the youth's medical file must be reviewed by qualified health personnel to determine whether the youth has any diseases or conditions which would be dangerously affected if chemical agents are used. This includes, but is not limited to: asthma, emphysema, bronchitis, tuberculosis, obstructive pulmonary disease, angina pectoris, cardiac myopathy or congestive heart failure.
- E. For staff to be able to use chemical agents, they must be fully trained and current in Threat Pattern Recognition/Use of Interventions and pass the current chemical agent certification course in use by OJJ.

- F. The highest ranking officer on duty shall be the person to administer the chemical agent.
- G. During an event involving the use of chemical agents, the following procedures shall be followed:
 - 1. Staff shall try to first de-escalate the situation by following the steps in Section IX.C. When possible, staff shall seek assistance of mental health and/or qualified health personnel at the onset of violent behavior to assist staff with attempts to de-escalate.
 - 2. If staff is not able to de-escalate the situation, and a set of circumstances as described in Section XVII.A or XVII.B and XVII.C has occurred, staff shall seek authorization for use of chemical agents. Staff shall contact the Assistant Secretary. If staff is unable to reach the Assistant Secretary, staff shall contact the Deputy Secretary. If staff is unable to reach the Deputy Secretary, staff shall contact the Youth Facilities Director - Statewide. If staff is unable to reach the Youth Facilities Director - Statewide, then the Director of the Transitional Treatment Unit may authorize use of chemical agents.
 - 3. All attempts to receive authorization shall be logged as well as from whom the authorization was received, including date and time.
 - 4. Video recording is required during an event that involves the use of chemical agents.
 - 5. Upon gaining physical control, staff shall seek the assistance of qualified health personnel who shall examine the youth and treat any injuries. If any staff involved in a use of chemical agents event reports an injury, qualified health personnel should provide an immediate examination and initial emergency treatment as required. Staff may also seek treatment from their personal physician.
 - 6. After an event involving the use of chemical agents, the cell, room, or common area cannot again be used until the area has been cleaned and disinfected and the agent or agents neutralized.
 - 7. Staff responding to an event involving the use of chemical agents but who are not physically involved in an incident of Active Aggression or higher are required to fully complete UOR's describing what occurred before the completion of their tour of duty. Staff who are physically involved in an incident of Active Aggression or higher will be required to write an initial UOR prior to the completion of their tour of duty. The

initial UOR will give a brief explanation of what happened and should be concluded with “a supplemental UOR is pending” A supplemental UOR (with a full/comprehensive/detailed report of the incident) should be completed within 24 hours of the initial UOR.

- H. All containers with chemical agents shall be tagged, weighed and the weight of each container logged at the beginning of each shift by the Shift Commander using Attachment (c), the Chemical Agent Inventory and Control Form. The chemical agents shall be secured in a locker with inventory and Safety Data Sheets (SDS) nearby.
 - 1. After an incident involving the use of chemical agents, all chemical agent containers used shall be weighed and the weight recorded on the Chemical Agent Inventory and Control Form.
 - 2. If an inventory check reveals more than a .1 gram in weight difference in the amount of chemical agent stored in a container from the last inventory check, additional documentation is needed to explain the difference in weight. This can be a UOR form or any other relevant forms that explains or describes what caused the change in weight. IS shall be notified of all changes in the amounts of chemical agents.

XVIII. MANDATORY TRAINING AND REPORTING PROCEDURES:

- A. YS staff as described in Section VI of this policy shall participate in TPR/Use of Interventions training. This training shall be conducted during new hire orientation and annual in-service training by TPR Certified Instructors (refer to YS Policy No. A.2.24). JKM guidelines shall be followed.
- B. Mandatory training for all secure care staff shall be scheduled and documented following revisions to this policy. TPR Instructors are required to take the following courses in order to be able to train staff:
 - 1. Threat Pattern Recognition Instructor Certification Program; and
 - 2. Threat Pattern Recognition Instructor Recertification Program
- C. TPR Instructors shall train all required pre-service and in-service TPR classes throughout the year.
- D. Situations involving a physical intervention as described in Section VIII, XI.C.2.b. and e., and Section XII shall be reported on a UOR by all staff involved in, witnessing or in the area of the incident, or told by a youth of such an incident involving a physical intervention.

The UOR shall be completed and submitted to the OSS no later than the conclusion of reporting employee's tour of duty. It shall be the responsibility of the OSS to ensure that all staff have submitted their UOR's as required by this policy. All prior efforts and steps to de-escalate the situation and avoid the use of physical intervention shall be described in the UOR.

- E. The following reports shall be completed as appropriate to the incident:
 - 1. "Unusual Occurrence Report" (UOR);
 - 2. "Use of Physical Intervention/Mechanical Restraint/Flex Cuff Report" - This report must be completed for each use of restraints as described in Section XVIII.A above.
 - 3. "Accident/Incident Report (A&I)" and accompanying photographs.
- F. The Facility Director/designee shall review all use of physical intervention incidents and refer any improper uses to the IS office located on the facility grounds (refer to YS Policy No. A.1.4).

This does not include the routine use of mechanical restraints for transport or internal escort purposes as outlined in Section XI. C., unless there is cause for review (e.g., reason to believe the restraints were improperly applied, etc.).
- G. IS staff shall independently review all physical intervention incidents.
- H. The establish procedures for the reporting of incidents of a serious nature outlined in YS Policy No. C.5.2 shall be adhered to.

XIX. QUALITY ASSURANCE:

- A. Facility I.S. Staff review all shift packets to include use of interventions and investigate as deemed appropriate in accordance with established protocols.
- B. Annual Continuous Quality Improvement Services (CQIS) audits shall include review of mechanical restraint paperwork, logbooks and inventory to ensure policy compliance.

XX. POLICY VIOLATION:

- A. Any employee who violates this policy shall be subject to disciplinary action and may be required to attend additional training at the Facility Director/Deputy Director/Assistant Director's discretion.

- B. Additional training may be specifically scheduled for the employee or the employee may be required to attend the next scheduled new-hire 3-day TPR/Use of Interventions training classes or the 40 hour initial TPR course at the employee's facility or another facility.
- C. This training shall be in addition to any regularly-scheduled training the employee is required to attend.

Previous Regulation/Policy Number: C.2.6

Previous Effective Date: 02/02/2022

Attachments/References:

- C.2.6 (a) Use of Physical Intervention Mechanical Restraint Flex Cuff Report October 2023.docx
- C.2.6 (b) Restraints List May 2021.docx
- C.2.6 (c) Chemical Agent Inventory and Control Form October 2022

OFFICE OF JUVENILE JUSTICE
USE OF PHYSICAL INTERVENTION / MECHANICAL RESTRAINT / FLEX CUFF REPORT
☐ ACY ☐ ACY-SM ☐ BCCY ☐ SCY ☐ SCYC

Date of Incident: _____

Time of Incident: _____ AM/PM

Location of Incident: _____

TYPE OF INCIDENT (Check One)							
<input type="checkbox"/> Staff-on-Youth		<input type="checkbox"/> Youth-on-Youth			<input type="checkbox"/> Youth-on-Staff		
PHYSICAL INTERVENTION <u>USED ON</u> THE FOLLOWING YOUTH (If more than 3 youth, use separate sheet)							
Youth's Name & JETS #	Type of Intervention (Check all that apply)	Restraint Applied Time (AM/PM)	Restraint Applied By: (Name/Title)	Restraint Removed At: Time (AM/PM)	Duration of Mechanical Restraint Usage	Restraint Removed By: (Name/Title)	One-on-One Supervision * Name/Title
	<input type="checkbox"/> Mechanical <input type="checkbox"/> Leg Irons * <input type="checkbox"/> Handcuff Belt <input type="checkbox"/> Handcuffs <input type="checkbox"/> Flex Cuffs <input type="checkbox"/> Physical	<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> less than 15 minutes <input type="checkbox"/> 15 minutes or longer		
	<input type="checkbox"/> Mechanical <input type="checkbox"/> Leg Irons * <input type="checkbox"/> Handcuff Belt <input type="checkbox"/> Handcuffs <input type="checkbox"/> Flex Cuffs <input type="checkbox"/> Physical				<input type="checkbox"/> less than 15 minutes <input type="checkbox"/> 15 minutes or longer		
	<input type="checkbox"/> Mechanical <input type="checkbox"/> Leg Irons * <input type="checkbox"/> Handcuff Belt <input type="checkbox"/> Handcuffs <input type="checkbox"/> Flex Cuffs <input type="checkbox"/> Physical				<input type="checkbox"/> less than 15 minutes <input type="checkbox"/> 15 minutes or longer		
If handcuff belt was not utilized - was youth cuffed behind the back? <input type="checkbox"/> YES <input type="checkbox"/> NO If leg irons were utilized - was youth provided one-on-one supervision? <input type="checkbox"/> YES <input type="checkbox"/> NO		Time of Approval from Facility Director/Deputy Director/Assistant Director PRIOR to the use of Mechanical Restraints: _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM Time Facility Director Notified of approval provided by Youth Facilities Director - Statewide/Assistant Secretary: _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM Time Facility Director Notified of removal of Mechanical Restraints _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM Time of Approval from Secure Care Director/Assistant Secretary PRIOR to the use of Mechanical Restraints: _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM Time of Approval from Secure Care Director/Assistant Secretary for use of Mechanical Restraints <u>longer than 15 minutes</u> : _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM Time of Notification to Secure Care Director/Assistant Secretary of <u>removal of 15 minute or longer</u> restraint use: _____ <input type="checkbox"/> AM / <input type="checkbox"/> PM					
<u>OTHER YOUTH INVOLVED IN THE INCIDENT</u> (If more than 9 youth, use separate sheet)							
1.	JETS #	4.	JETS #	7.	JETS #		
2.	JETS #	5.	JETS #	8.	JETS #		
3.	JETS #	6.	JETS #	9.	JETS #		
PHYSICAL INTERVENTION <u>USED BY</u> THE FOLLOWING STAFF (if more than 4 staff, use separate sheet)							
			(Name/Title)	(Name/Title)			
			(Name/Title)	(Name/Title)			
MECHANICAL RESTRAINT / FLEX CUFF AUTHORIZATION FOR USE							
Authorized By:				(Name/Title)	Time of authorization: (AM/PM)		

<u>OTHER STAFF INVOLVED (Name/Title)</u>		
1.	4.	7.
2.	5.	8.
3.	6.	9.
CIRCUMSTANCE AND JUSTIFICATION FOR USE OF PHYSICAL INTERVENTION: (Check all boxes that apply) Was the use an EXCEPTION TO THE CONTINUUM? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Prevent an escape;	<input type="checkbox"/> Prevent damage to property; and/or security systems or to recover a weapon;	
<input type="checkbox"/> Prevent an act which could result in death or severe bodily harm to the youth or another person;	<input type="checkbox"/> Control a high profile incident such as a major group/unit disturbance which threatens the safety/security of the facility.	
<input type="checkbox"/> Defend one's self or others against a physical assault;		
<input type="checkbox"/> Separate participants in an altercation;	<input type="checkbox"/> Enforce legal orders and instructions.	

COMMENTS: _____

CIRCUMSTANCE AND JUSTIFICATION FOR USE OF MECHANICAL RESTRAINTS / FLEX CUFFS (Check all boxes that apply)	
<input type="checkbox"/> Youth poses a current escape risk;	<input type="checkbox"/> Youth involved in an altercation or other serious incident;
<input type="checkbox"/> Youth has engaged in a recent pattern of assaultive behavior toward staff or other youth;	<input type="checkbox"/> Less restrictive measures have not been successful and youth continues to engage in aggressive or assaultive behavior or presents a danger to himself, another youth, staff, or the security of the facility.

COMMENTS: _____

LESS RESTRICTIVE NON-PHYSICAL STEPS TAKEN TO MINIMIZE THE USE OF PHYSICAL INTERVENTION Check all steps taken to minimize the use of physical intervention / mechanical restraints / flex cuffs.	
<input type="checkbox"/> 1. Verbal request for compliance in a fair and respectful manner;	<input type="checkbox"/> 6. "Tap-out" of the staff member involved whose involvement has the potential for escalating or aggravating the incident.
<input type="checkbox"/> 2. Discussion/counseling with the youth in an attempt to de-escalate the situation;	
<input type="checkbox"/> 3. Continued dialogue in a firm non-threatening manner clearly instructing the youth to cease and comply;	<input type="checkbox"/> 7. Voluntary seclusion of youth into his own room; OR <input type="checkbox"/> 7. Staff removal of youth to other area within camera view, if permissible.
<input type="checkbox"/> 4. Request for additional staff presence;	<input type="checkbox"/> 8. Accommodations for special consideration youth were considered.
<input type="checkbox"/> 5. Removal of the youth from the immediate area;	<input type="checkbox"/> 9. Shift supervisor assumes control of the situation.

COMMENTS: _____

YOUTH'S MENTAL ILLNESS / DEVELOPMENTALLY DISABLED INFORMATION (SMI/ID) This section is to be completed if a youth involved has been assessed as being either mentally ill and/or intellectually disabled.								
Youth's Name	JETS #	Information (Check box that applies)	Youth Assessed By: (Check all boxes that apply)	Youth Assessed at Scene?	Youth Assessed at Infirmary?	Youth Assessed at Other Location? (Specify)	Time of Assessment	Staff Assessment Conducted By: Name/Title
		<input type="checkbox"/> Mental Illness (SMI) <input type="checkbox"/> Int. Disabled (ID)	<input type="checkbox"/> Medical Staff <input type="checkbox"/> Mental Health Staff <input type="checkbox"/> Counseling Staff					
		<input type="checkbox"/> Mental Illness (SMI) <input type="checkbox"/> Int. Disabled (ID)	<input type="checkbox"/> Medical Staff <input type="checkbox"/> Mental Health Staff <input type="checkbox"/> Counseling Staff					

YOUTH/STAFF DEBRIEFING/CIRCLE-UP INFORMATION			
DID THE FOLLOWING TAKE PLACE	YES	NO	COMMENTS
Was a youth debriefing / circle-up conducted following the incident? (Circle what occurred) Date: _____ Time: _____			Explain:
Was a staff debriefing conducted following the Incident by the FD/DD/AD? Date: _____ Time: _____			Explain:

COMPLETED REPORT CHECKLIST			
ARE THE FOLLOWING REPORTS ATTACHED	YES	NO	COMMENTS
Employee UOR Report(s)			
Youth Code of Conduct Report(s)			
Was youth placed in BI?			
Did a youth debriefing / circle-up occur following the incident?			
Did a staff debriefing occur following the incident?			
Was the physical intervention use in compliance with YS Policy No. C.2.6 <input type="checkbox"/> YES <input type="checkbox"/> NO			

OPERATIONS SHIFT SUPERVISOR SIGNATURE / TITLE _____ PRINT NAME AND TITLE _____ DATE _____ AM / PM
 TIME

COMMENTS:

RESTRAINTS LIST

The following items are approved for purchase without authorization from the Secure Care Director or designee.

Security/Mechanical Restraints

Leg Irons

Handcuffs

Handcuff Belt

Flex-cuffs (May be used only in an emergency situation or when the youth's size precludes the use of handcuffs.)

Chemical Agent Inventory and Control Log

Employee Name (Print Name and P #)	Date	Freeze Plus P or Sabre Phantom	Time Out	Canister Weight	Employee Signature	Time In	Canister after use	Employee Signature